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57299 Kathy Manke Avago Technol 4380 Ziegler Ro	ogies Limited oad	5/2010	I Si	papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
Fort Collins, Co	O 80525					(Depositor's name)
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APPLICATION NO.	FILING DATE		FIRST NAMED INVENTO	DR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/801,204 03/15/2004		Boon Keat Tan		L	70040131-1	3118
TITLE OF INVENTION	N: SYSTEM AND METI	HOD FOR CANCELING	DARK PHOTOCURRE	NT IN A COLOR SE	NSOR CIRCUIT	
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DU	E PREV. PAID ISSUE	FEE TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1810	07/06/2010
EXAMINER		ART UNIT	CLASS-SUBCLASS			
NGUYEN, LUONG TRUNG		2622	348-243000			
Change of correspondence address or indication of "Fee Address" (37 FR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
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Please check the approp	riate assignee category or	categories (will not be pr	rinted on the patent):	Individual (PCo.	rporation or other private gro	oup entity Government
4a. The following fee(s) are submitted: 4 January Jan			b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 5637/82 (enclose an extra copy of this form).			
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Authorized Signature Typed or printed nam	Part	ttes Patent and Trademark West-zel	Office.	Date	5/3/10	4
submitting the complete	ed application form to the ions for reducing this bu Virginia 22313-1450. DC	e USPTO. Time will vary	depending upon the ind Chief Information Offi	ividual case. Any cor cer IIS Patent and "	ne public which is to file (and inutes to complete, including ments on the amount of the trademark Office, U.S. Dept. SEND TO: Commissioner	artment of Commerce. P.O.

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